

Ashland County Board of Health Meeting Agenda Tuesday, May 14, 2019 @ 7:00 pm 1763 State Route 60, Ashland, Ohio 44805

Call To Order: Jeff Hardman - Ashland County Board of Health

- 1. Approval of April Minutes
- 2. Approval of April Expenses
 - A. General/ Food Protection/PHEP
- 3. Division Reports
 - A. Health Commissioner
 - Community Health Improvement Planning (CHIP)
 - B. Environmental Health
 - Sewage Complaint Update
 - C. Nursing
- 4. Old Business
- 5. New Business
 - A. Approval of Expenses in Excess of \$5,000.00
 - Vital Statistics Technology Fees \$14,148.24
 - b. Merg Vaccine (MMR, Rota, Varivax) \$5,457.90
 - B. Consideration of Approval:
 - a. PHEP Continuity of Operations Plan
 - b. 2020 Revenue and Budget Proposal to submit to Ashland Co Commissioners
 - c. Public Records Policy
 - C. Resignation of Jenna Boliantz, RN, BSN last day May 21, 2019 BCMH
 - D. Discussion of 2019 General Election Tax Levy proposal
 - E. Sign Letter of Support from Ashland County Board of Health to apply for accreditation through PHAB
- 6. Personal Privileges
- Executive Session, if needed by the BOH: Pursuant to Section 121.22 of ORC Regarding the appointment, employment, dismissal, discipline, promotion, demotion or compensation of an employee or official
- 8. Adjourn --- Next Meeting: June 11, 2019 @ 7:00 pm



Ashland County Board of Health Meeting Minutes 1763 State Route 60, Ashland, Ohio 44805 April 9, 2019 – 7:00pm

Board of Health Members Present:

Ron Puglisi

Jeff Hardman

Dr. Rebecca Cawrse

Stan Kopp

Dr. David Tomchak

Staff Members Present:

Sarah Goodwill Humphrey

Health Commissioner

Shirley Bixby

Nursing Director

Pat Donaldson

EH Director

Lauren Jeffery

Vital Statistics

Guests Present:

Joe Becker

Tori Mowry

Call to Order: The Ashland County Health Department Meeting was called to order by Board President, Ron Puglisi 7:09 pm at 1763 State Route 60, Ashland, Ohio 44805.

Approval of Minutes: A motion was made to approve the March 2019 Board of Health Meeting minutes by Stan Kopp and seconded by Dr. Rebecca Cawrse. The motion carried.

Approval of Expenses: A motion was made to approve the March 2019 General /Food Protection/PHEP expenses by Jeff Hardman and seconded by Dr. Rebecca Cawrse. The motion carried.

Health Commissioner Report: Health Commissioner Sarah Humphrey addressed the Board of Health and reminded them that her report was in their packet but there were a few things that she wanted to highlight. The District Advisory Council meeting on March 28, 2019, had a quorum. Commissioner Humphrey congratulated Dr. Rebecca Cawrse for being re-elected as a 5 year member.

Accreditation has been worked upon diligently. Jenny Helbert and Jill Hartson as well as Sarah have developed a tracking tool for documentation; the deadline is for application to PHAB is

June 30th. There is only one large prerequisite document yet to be completed, which is the Quality Improvement Plan. This plan is expected to be completed by April 30th.

Sarah reported that we did receive notice of our award for the third year of the mosquito control grant, through the Ohio EPA. The ACHD was awarded the maximum amount allowable through the grant, which is \$25,000.00. A large activity of the mosquito control grant is the scrap tire recycling voucher project which is collaboration with Ashland County Recycling Center.

We have also been working very diligently on the Community Health Assessment. The Board of Health members were extended the invitation to look over the draft report. The first 14 pages is the executive summary which highlights some key adult data points. There is a youth survey that will be conducted in the next week or two, between the grades of 6 and 12 at the following schools: Ashland City, Mapleton, Ashland County West Holmes Career Center and Ashland Christian School. Once the youth survey is complete and the data compiled, it will be added to the Draft CHA for finalization.

Tomorrow April 10, 2019 is the first of four meetings of the Community Health Improvement Planning process. The Board of Health Members are invited to attend from 10:00am to 2:00pm at the ACHD office. The attendees will work on identifying the health need priorities and then identify community resources and any factors that might get in the way of being able to accomplish these goals. This will be a very involved process, but with the input of the entire community, will result in an implementation plan that will help make a positive impact on the community's health.

May 1st the ODH Annual Financial Report, Subsidy Application, and Quality Indicator report are due. This year's reports are "new" and much more detailed. The AFR also addresses financial gaps that local health departments have when meeting the 10 Essential Services with limited funding.

Sarah explained that we will be making a few changes to the layout of the Health Department office space due to specific safety issues. We have a lot of public interaction, not just from our agency but, from other agencies in the building. There is direct access into several of the office spaces which can lead to uncomfortable and potential unsafe interactions with members of the public. We had a recent incident that brought the level of awareness of needing restricted public access to personal office spaces of staff, the ability to alert others in emergency situations, and ensuring safety measures when in the building after-hours or with limited other staff members.

We have been asked by the American Red Cross to install smoke detectors for Ashland County. We will do this in teams from 12-4pm on May 2, 2019. If anyone would like to participate, please email or call Jill Hartson.

Emergency Preparedness Division Report: Please see the report provided in the Board Packet.



Environmental Health Division Report: Pat reported that FSO and RFE licensing had recently been completed. There were about 10 that were late and those late fees were paid. Ron Puglisi asked what was done with the late fees. Pat let them know that late fees consist of 25% of our local licensing fee only which goes into the food protection fund for general program costs and overhead.

Pat also spoke about District Advisory and how it has changed from when people voiced their questions and concerns in the past and now nobody seems to say anything. Pat said that she had thought the meeting had gone very good.

Pat and AJ attended the annual ODH Midwest Workshop to receive program updates and earn CEUs which are required to maintain State Registration as a Sanitarian.

At the end of the month the renewals for campgrounds and swimming pools will be sent out as we are moving into the summer recreational program season.

Pat asked if there were any questions. Stan Kopp asked why AJ's mileage was so high. Pat pointed out that most of those miles were due to travel to Columbus for the ODH Midwest Workshop

Nursing Division Report: The Nursing Division report was included in the monthly board packet. Shirley reported that the Shingrix vaccine had arrived which had been on back order for over three months. Shirley stated that we are now providing the first dose to interested residents and giving the second dose to those who had been waiting.

There was a delivery of 16 car seats and there are only three left. Shirley reported that she also went to car seat training in Cleveland.

There has been a Hepatitis A outbreak around the state of Ohio. Communicable disease staff have been participating in ODH conference calls.

Shirley went to training on HIPPA as well as TB training. We will still be able to administer the Mantoux test. Other health departments, who have a larger TB unit due to higher case incidence, are using the Quanta-FERON- Gold Tb testing exclusively.

Family Fun Day is May 4th at the fairgrounds in conjunction with Ring in Spring. The community baby shower is June 19th and Amish Health and Safety Day is August 15th. It will be held at the Enis and Emma Keim Farm in western Ashland County.

There have been some atypical disease cases that Dr. Tomchak, Shirley and Sarah worked together on. One of these diseases was a HIB Meningitis case that tested our ability to



prophylaxis case contacts. The case is currently receiving follow up care at a local pediatrician's office.

Old Business: None

New Business: Presentation of 2018 Annual Report/Annual Financial Report

Discussion:

Sarah shared about a couple of the major reports that have been turned in to our partnering entities. By March 1st of every year we turn in an annual financial report to the Ohio Auditor of State. The first page of this report is the combined statement of the general fund as well as our restricted funds which are our food as well as our PHEP funds. The general fund allows us most of our operating budget.

Sarah also shared that there have been a couple of "windfalls" which have left us a carryover into 2019. This includes the support from ODH as a result of our contract to consolidate Public Health services with the City of Ashland. Looking forward, we will also reap a small benefit from the Rover Pipeline installation in the 2019 tax levy installment. We continue to be very cognizant about our finances and carry on business in a prudent fashion in the instance that a future levy attempt would not be successful.

The remaining pages of the AFR is the required notes of the financial statements, which speak to the business operations of the ACHD including worker's comp coverage, liability, special/restricted funds, compliance issues (of which we've had none), etc.

Discussion:

The Ashland County Health Department Annual Report, also a mandated document was shared by Sarah. The ACHD presents this report with the District Advisory Council for their review annually. This report covers Health Department activities, financial standing, strategic priorities, staff, etc.

In this report you will see recognition of the staff that perform all the duties and activities of the health department throughout the year, thanking them for making the health of Ashland County their priority. It was very important to talk about accreditation in this report, including the guidelines that are being mandated in the accreditation process, the cost, and why pursuing accreditation is a good investment for our community.

Also, in the 2018 ACHD Annual Report you will see a state Hepatitis A outbreak update, as well as Vital Statistics data for Ashland County, grant updates for our department, and our overall funding streams for operating the General Health District. As you will see, our funding through grants has increase however, they are very competitive and can be cut any time a budget constraint comes down from the higher level of government. We are very thankful for the grants that we have received but we do not intend to fully rely on them and need local supports through the tax levy.

Consideration of Approval: PHEP Continuity of Operations Plan

Discussion:

Sarah presented the Continuity of Operations Plan on behalf of Jill Hartson. This is a plan that has identified, for the Ashland County Health Department, what are called "mission essential functions". Jill, through the help of the leadership team identified some of those functions that, in an emergency situation would be the activities that would take priority in getting back to running. Public health surveillance and mitigation of communicable disease is a high priority, as well as food protection, tuberculosis control, and sewage and water services. Records management, which includes vital statistics, as well children with medical handicaps and childhood lead are all ranked as priority services at the ACHD. The document then goes on to determine who, in current staffing, holds that primary responsibility of managing those programs and activities and, do we have the internal capacity to have a back-up individual.

Sarah then passed the document around for the Board of Health to review. She shared that all deliverable that have been submitted to-date has been approved and we have reimbursement for those activities. Jill will be working on the MRC roster and activities next and to ensure that volunteers are well trained, receive communications properly and meet the credentialing criteria such as background checks.

The Board of Health decided to postpone approving the Continuity of Operations plan until the next meeting, so they might have a chance to read over this document fully.

Election of Board of Health President and President Pro Tempore:

A. Approval to nominate and vote Jeff Hardman as 2019-2020 Board of Health President.
 Motion Made By: Stan Kopp

2nd: Dr. David Tomchak

Motion carried.

Approval to nominate and vote Dr. Rebecca Cawrse President Pro Tempore

Motion Made By: Stan Kopp 2nd: Dr. David Tomchak

Motion carried.

Personal Privileges - None

Motion to enter into Executive Session: Stan Kopp moved and Dr. David Tomchak seconded the motion to enter into Executive Session to discuss matters Pursuant to Section 121.22 of ORC- Regarding the appointment, employment, dismissal, discipline, promotion, demotion or compensation of an employee or official. Time: 8:11pm

Roll Call Vote:

Jeff Hardman	Yes
Dr. David Tomchak	Yes
Ron Puglisi	Yes
Dr. Rebecca Cawrse	Yes
Stan Kopp	Yes

Motion to leave Executive Session: Dr. Rebecca Cawrse moved and Dr. David Tomchak seconded the motion to leave Executive Session at 8:39pm.

Roll Call Vote:

Jeff Hardman	Yes
Dr. David Tomchak	Yes
Ron Puglisi	Yes
Dr. Rebecca Cawrse	Yes
Stan Kopp	Yes

Adjournment: The meeting was adjourned at 8:39pm

Next Meeting: The next Board of Health Meeting will be held on Tuesday, May 14, 2019 at 1763 State Route 60, Ashland, Ohio 44805 at 7:00pm.

Notes taken by: Lauren Jeffery

Jeff Hardman, President Ashland County Board of Health

Sarah Goodwill Humphrey, Health Commissioner Secretary to the Ashland County Board of Health

ASHLAND COUNTY HEALTH DEPARTMENT - HEIGAP SHEET

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Ashland County Health Dep ment - April Budget Report

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Ashland County Health Dep ment - April Budget Report

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Health Commissioner's Report

May 2019 Board of Health Meeting

- April 9th Pinwheel Placement Ceremony at Center Park with Ashland Co JFS
- April 10th 1 of 4 Community Health Improvement Planning mtg facilitated by HCNO
- April 11th Ashland County Pregnancy Care Center Annual Fundraiser AU
- April 12th AOHC Public Affairs Meeting
- April 17th FCFC Executive Committee Mtg
- April 17th Video Treatment Meeting with Vinyl Marketing
- April 18th Local Public Health System Assessment Meeting with Leadership Team
- April 23rd Vinyl Marketing Video Script Review Mtg with Jill.
- April 25th ~ 2 o 4 Community Health Improvement Planning mtg ~ facilitated by HCNO
- April 29th Personnel Meeting with Nursing Division
- May 2^M CORSA HR Training @ Ashland JFS
- May 6 -9th Biennial Audit by CE Harris of Budgeting and Operation Accounting Practices
- May 10th AOHC Public Affairs Meeting
- May 13th 18th 4th Qtr FY 2019 MAC Week
- May 13th Performance Management/Quality Improvement Plan Review Meeting w Anne Goon
- May 13-15th AOHC Spring Conference not attending due to schedule conflicts

Regular Meetings/Calls

- Weekly Ohio Department of Health (ODH)/Local Health Department (LHD) calls: Every Wed
 ⊕
 11am
- Monthly FCFC Full Council/Exec Meetings

Upcoming Dates of Importance

June 30th – Governor's Budget Deadline for applying for Accreditation through PHAB

Accreditation:

The Strategic Planning Committee is scheduled to reconvene to assess activities toward the identified Strategic Priorities and revise the plan, if required.

Grants:

The ACHD was awarded the Ohio EPA Mosquito Control Grant for the 3rd year. This grant is for \$25,000.00 and was signed by the Ohio EPA Director so it is currently available for expenses. However, we do still have some funding available from the 2019 award and therefore, I will be completing an application for a grant extension.

Mandy Bragg, the seasonal contractor for the MCG program, will begin collecting mosquitoes right after Memorial Day.

I completed a grant application for the Womens Fund at Ashland County Community Foundation for the purpose of purchasing additional carseats and pack n' plays for the Safe Child Passenger Seat and Safe Sleep initiatives of the Ashland County Health Department. This application deadline is May 15th, followed by a series of interviews prior to announcement of the awards.

In the fall, it is my intent to apply for a grant the Ashland County Community Foundation to cover the cost of a new vaccine cooler that we had recharged with Freon last year but is now unable to cold temperature again. The unit has been unplugged and taken out of use but I will explore the cost of having it looked at for leak repairs.

Jenna Bollantz and Jill Hartson had also been exploring funding supports for newborn home visiting services. Although local supports are not available at this time, they are looking at state funding as home visiting has been a priority of Governor DeWine with his formation of an advisory council tasked with making formal recommendations about how to best increase the state's investment in effective homes visitation programs. They will meet weekly over the next five to six weeks to inform the Executive State Budget, to be presented to the Ohio General Assembly in early 2019.

Finance:

The budgetary audit for 2017-2018 was conducted by 3 representatives of CE Harris during the week of May 6-10th. From all indications, the audit went very well. We were asked to produce much more documentation and provide verbal clarification during this round but it is believed to be due to the "newness" of two of the representatives to the budgetary review process. There were a couple of times that Jenny and I had to direct them to discrepancies within their own review or calculations. The supervisor made quick corrections and assured compliance was noted in all of those areas. A formal report will be received within the next several weeks.

The County Commissioners are in the process of approving the 2020 proposed budgets. These proposals will be presented at this BOH meeting and then sent on the commissioners for budgetary approval.

Personnel:

We continue to work on interpersonal relationships and communication, particularly in the Nursing Division. Personality assessment tests are a good way to better understand one another and the environment needed for each individual to prosper. These assessments will be given over the next few weeks, be shared with leadership and staff, then utilized in culture building activities that is hoped to build trust and communication.

Other:

Accreditation - CHA/CHIP Updates to be given at 8OH mtg

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ASHLAND COUNTY HEALTH DEPARTMENT DIVISION OF VITAL STATISTICS 1763 STATE ROUT 60, ASHLAND, OHIO 44805

VITAL STATISTICS MONTHLY REPORT APRIL 2019

	APRIL	JAN 1 - APRIL 30
TOTAL BIRTHS	26	85
MALE	13	44
FEMALE	13	41
HOME BIRTHS	7	21
TOTAL DEATHS	34	137
MALE	20	66
FEMALE	14	71
0-18	0	
19-44	0	
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BIRTH	185	764
DEATH	160	650

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Mileage Report

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January	222	375	317	232	1,146
February	133	278	440	318	1,169
March	341	83	929	440	1,400
April	296	478	802	28	1,662
May					0
June					0
July					0
August					0
September					0
October					0
November					0
December					0
2019 Totals	992	1.224	2,085	1.076	5377



ASHLAND COUNTY HEALTH DEPARTMENT

1763 State Route 60 • Ashland, Ohio 44805 419-282-4231 • 419-282-4360 Fax Sarah Goodwill Humphrey, MPH, CPH, RS Health Commissioner Equal Opportunity Employer / Provider

Jeff Carrick 857 TR 875 Ashland, Oh 4480

April 10, 2019

Dear Mr. Carrick,

This letter is in regard to the failed sewage treatment system currently serving your home, located at \$57 Twp Rd \$75, in Ashland County. As you are aware, this issue was brought to the attention of the Ashland County Health Department in May of 2017. Despite temporary measures to remediate this public health hazard, the problem persists and must be remediated immediately.

As a result of the ongoing discharge of insufficiently treated wastewater from the household sewage treatment system at the address stated above, the following steps must be taken prior to close of business on Friday, May 10, 2019.

The following steps are required:

- Permanently cap the outlet pipe located to the roadside ditch on Twp Rd 875.
 This will eliminate effluent discharge however, will require you to pump the treatment tank to avoid surfacing of wastewater on your own property;
 OR,
- 2. Obtain a contract or other written agreement with a registered septage hauler to pump the septic tank at a frequency of no less than every 4 days. Submission of documentation (e.g. pumping receipts, contract with frequency stated, etc) will be required to be submitted to this office as proof of compliance.

Along with Option 1 or 2, you are required to submit a comprehensive plan to the Ashland County Health Department (signed by yourself and the intended sewage system installer), stating the intent and timeline of the replacement of the current sewage treatment system, to be installed and approved within the next 90 days.

Failure to comply will result in this matter being brought to the attention of the Ashland County Board of Health, for their review and subsequent action, at the next regularly scheduled meeting, held on May 14, 2019 at 7:00pm at the Ashland County Service Center, 1763 State Route 60, Ashland, Ohio 44805

Your cooperation in this matter is appreciated.

Sincerely,

Sarah Goodwill Humphrey, MPH, CPH, RS

Health Commissioner

Ashland County Health Department

Pat Donaldson, BS, RS

Director of Environmental Health Ashland County Health Department

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April 2019 PHEP/MRC Coordinator Report

Trainings/Webinars/Community Meetings

- Jill presented at the Social Service Agency luncheon meeting April 1 and the Ashland County Healthcare Coalition meeting April 23 to fulfill PHEP Deliverable 6 – Meeting with Organizations That Serve Individuals with Access and Functional Needs. Jill also met with Mark Rafeld and Mike Arthur (American Red Cross) to discuss this deliverable in more detail.
- All participated in two CDC webinars for communicable disease preparedness (specific to a novel
 influenza outbreak).
- Jill participated in two CHIP meetings for the Community Health Needs Assessment.
- Jill attended the NECO Regional MRC Workgroup at Summit County Public Health on April 9th to fulfill deliverable 16.1.
- All attended the Ashland County Homeless Coalition meeting on April 10th,
- All attended the April 17th Local Emergency Planning Committee. Discussed in detail the previous day's tornado in Shelby and Richland County's response and recovery efforts.

PHEP Grant Updates

- Deliverable 8.3, Q3 Outbreak Report Status Worksheet was submitted on April 2.
- Deliverable 15.3, the Communications/OPOD Acknowledgement Worksheet and OPHCS Message Summary Report was submitted on April 8.
- Deliverable 16.1, ACHD's participation in the development of the Regional Volunteer Management Plan, was submitted on April 22.
 - Deliverable 16.2, ACHD's signature page that demonstrates our adoption of the Regional Volunteer Management Man, was submitted on April 22.
 - Deliverable 2.1, the Mass Fatality Annex was submitted on April 30.
 - Deliverable 6.1, the Community Partner Meeting Workbook was submitted on April 30.
 - This was a big deliverable that called for face-to-face meetings (phone conversations were not acceptable) with organizations in Ashland County that serve individuals with an access and/or functional needs. Information from these meetings was compiled in an Excel spreadsheet that included the organizations' pertinent information such as contact name, contact method, service provided and number of individuals served. This is not an all-inclusive list as we could only include organizations who attended a meeting, and not all organizations attended one of the three presentations. From these meetings, we also had to identify planning gaps and response gaps that need to be addressed with our community partners.
 - Approved Deliverables submitted for reimbursement in April 2019 include:
 - Deliverable 20.1 Exercise Event Review Form (\$5,707.02)
 - Deliverable 20.2 After-Action Review/Improvement Plan (AAR/IP) (\$5,707.02)
 - Deliverable 15.3 Communications/OPOD Acknowledgment and OPHCS Summary (\$1,831.88)
 - Deliverable 8.3 Q3 Outbreak Report Status Worksheet (\$1,585.28)
 - Deliverable 4.1 Continuity of Operations Plan (CDOP) Workbook (\$3,522.85).

- Deliverable 22.2 24/7 Drill (\$951.17)
- Deliverable 6.1 Community Partner Meeting Workbook (\$3,522.85)
- Deliverable 16.1 Participate in the development of the Regional Volunteer Management Plan (\$1,056.86)

MRC Unit 1181 Updates

John Cadley, Rosie Moffett, Judy Weaver, and Bethany Winters volunteered at April's clinics.



Requisition Request

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OHIO DEPARTMENT OF HEALTH VITAL STATISTICS TECHNOLOGY FEES



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Invoice Date: 4/8/2019

Due Date: 4/30/2019

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1763 ST. RT. 60

ASHLAND OH 44805

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OHO CHILDRE	N TRUST FUND FEE	CERTIFIED COMES SOLD LOCALLY FROM (JAY COUNT : 589 DEATHS COUNT : 490	ATMACK OF	2010) BIRTHS
Service Date	Purcluse Order Number	Unit Price	Quantity	Total Cost
3/31/2019	-	\$2.91	1959	\$3,001.00
Description		Detailed Description		
VS BASE FEE		CERTIFIED COPIES SOLD LOCALLY FROM (JAN COUNT : 569 DEATHS COUNT : 490	MINNY - MARCH OF	2019) BURTHS
Service Date	Purchase Order Humber	Unit Price	Quantity	Total Cost
3/31/2019		\$3.00	1059	\$3,177,00
Description		Detailed Description		
VS TEICHNOLO	GYFEES	CERTIFIED COPIES SOLD LOCALLY FROM (JAN COUNT : 589 DEATHS COUNT : 490	ALMRY - MARCH OF	2019) BIRTHS
Service Date	Purchase Order Number	Unit Price	Quantity	Total Cost
3/11/2019	340	\$5.00	1059	\$5,295.00
		Total Am	ount Due:	\$14,148.24

Pursuant to Ohio Revised Code sections 3109.14, 3705.24, and 3705.242, all fees from the sale of certified records must be remitted to ODH no later than 30 days following the end of each quarter. DDH will enter the corresponding revenue to the appropriate coding in OAKS and forward the fees to the Treasurer's Office for deposit within three business days of receipt, as set forth in Administrative Code section 113-1-02(A).

MEALTH DEPT

FUND:	9
ACCT S.	8050
DATE	4/11/1apd
no.s_	9-792
10.0_	No have

List of Prioritized Mission Essential Functions (MEFs)*

MEF Priorit	MEF Title	MET Description
-	Public Health Surveillance and Mitigation	ACHID provides public health surveillance to identify communicable disease threats that would initiate the development of mitigation actions. Surveillance services are provided 24/7 and are accessible through the ACHID after-hours hotline. An ensite vaccination clinic every Tuesday and every month on the fourth Monday serve as routine intervention to support ACHID's mitigation program. ACHID is a provider of the Vaccine for Children ages 0 – 18. Onsite and offsite seasonal influenza vaccination clinics are offered, as well as outherak specific vaccination clinics as needed. Further supporting ACHID's mitigation efforts is the use of non-pharmaceutical interventions to reduce the risk of exposure and the transmission of a communicable disease. Recommendations are based on the communicable disease and serveillance findings, and could include isolation and quarantine.
ee.	Food Protection	ACHD conducts a food safety program that routinely monitors all public retail food establishments and food service operations in Ashland County to assure the highest standards in food safety. The primary purpose of this program is to protect the public from foodborne illness. Public concerns regarding a food establishment can be made at any time through the ACHD's 24 bour hotline.
en,	Tuberculosis Program	유무성경
4	Sewage and Private Water Services	ACHD monitors and approves the installation of new or replacement sewage systems and private water systems. Properly installed sewage systems prevent contamination of groundwater supplies and reduces the incidence of

Introduction

executive departments and agencies to ensure that Mission Essential Functions (MEFs) continue to be performed during a wide range Security Presidential Directive-51/Homeland Security Presidential Directive-20 (NSPD-51/HSPD-20), is an effort within individual Continuity of Operations (COOP), as defined in the National Continuity Policy Implementation Plan (NCPIP) and the National of emergencies, including localized acts of nature, accidents and technological or attack-related emergencies. Mission Essential Functions (MEFs) are a broad set of essential functions that an organization must continue throughout—or resume ripidly after-a disruption of normal activities. MEFs are those functions that enable an organization to provide vital services, exercise civil authority, maintain the safety of the public, and sustain the industrial/economic base.

Essential Supporting Activities (ESAs) are the many activities that must be performed to ensure continued performance of MEFs. ESAs are common to most agencies [e.g., payroll, workplace security, staffing, ensuring Information Technology (IT) systems are operating, etc.] but are only indirectly related to the jurisdiction's primary missions. Simply put, ESAs support the continued performance of the MEFs. Orders of Succession are a formal, sequential listing of organization positions (rather than specific names of individuals) that identify who is authorized to assume a specific leadership or management role under specific circumstances.

headquarters (HQ), regional and field levels, and all other organizational locations. Generally, pre-determined delegations of authority will take effect when normal channels of direction have been disrupted and will lapse when these channels have been re-established Delegation of Authority is the identification, by position, of the authorities for making policy determinations and decisions at the

Human Resources relate to those policies, plans, and procedures that address human resources needs during a continuity event, such as guidance on pay, leave, work scheduling, benefits, telework, hiring, authorities, and flexibilities. Within this Workbook, human resources planning will focus only on the staffing requirements for MEFs and ESAs.

sewage-related missances, which ACHID also addresses. ACHID maintains a public list of registered septage haulers and contractors who install treatment systems or "clean" sowage tanks. In addition, ACHID sanitarians inspect private water hauling equipment and test drinking water for harmful bacteria. ACHID sanitarians also cooperate with the Ohio Environmental Protection Agency in the review of the installation of commercial water supply systems.	The ACHD maintains vital statistics and patient medical records. Vital statistics include live births, deaths, and fetal deaths. These statistics are used to assess Ashland's health status, track events of public health importance, define public health priorities, evaluate programs and facilitate public health research. Individuals who were been anywhere in the state of Ohio can purchase a copy of their birth certificate at the ACHD. Death certificate copies are available at the ACHD, although only for deaths in Ashland County. Also available are patient medical records which the ACHD maintains to provide information on a patient's care to other healthcare professionals. ACHD meets all Health Insurance Portability and Accountability Act (HIPAA) requirements.	ACHID facilitates Ashland County's Children with Medical Handicap (CMH) program which includes the Diagnostic Program and the Treatment Program. The Diagnostic Program provides financial assistance for the diagnostic procedures used to identify a handicap. The Treatment Program provides financial assistance for the ongoing treatment of a medical handicap. There are no financial requirements for CMH eligibility, however, the child mast be an Oftio resident under the age of 21 with a possible medical handicap. They must also be under the care of a CMH physician.	Lead poisoning is an environmental threat to children in Ohio. A home lead inspection by the Ohio Department of Health (ODH) is generally initiated by a child's physician. ODH needles the ACHD for home lead readings over 5. ACHD provides case management to the family for readings 10 and over. ACHD's case management services include home visits and referrals for additional services and/or financial assistance. The home visits include comprehensive education on lead sources, food and nutrition, housekeeping
	Statistical and Records Management	Children with Medical Handicaps	Childhood Lead Program
	en.		

3	The second of th	and maintenance, and the adverse health effects of lead exposure.
90	Animal Bise Program	The ACHD Animal Bite program serves to protect the public from the threat of rables. Rabies is a serious viral disease that affects animals and humans and is almost always fatal. ACHD educates the public on rabies prevention, including pet vaccination and wildlife/stray avoidance, to minimize human exposure to the disease. All mammal bites and rabies exposures must be reported to the ACHD for further investigation. The ACHD also assures all dogs, cass and ferrets involved in a human bite are quarantined per state and local regulations.
0.	Solid Waste Services	The ACHD, along with the Ohio Environmental Protection Agency, inspects the Ashland County Landfill. The ACHD sanitarian also inspects infectious waste generators, construction and demolition debris sites, and composting facilities. In addition to inspections, the ACHD regulates health and environmental compliance at these sites through permits and authorizations, monitoring, and compliance assistance.
9	Recreational Program Inspections	ACHD sanitarians conduct comprehensive inspections in all of the schools in the county semi-aerually. Inspections focus on health or sanitary issues that may pose a threat to students and staff. Close attention is paid to indoor air quality, proper storage and handling of chemical hazards, pest control and pesticide use, playground safety, child care needs, and general fire and electrical safety. The ACHD sanitarian also inspects the Ashland County Jail. Further, ACHD inspects campground, RV parks and manufactured becne parks. ACHD assures adequate spacing is maintained between campers and tents, certifies trash is stored and disposed of property, identifies standing water to prevent mosquito breeding, and ensures proper disposal of sewage and a safe drinking water supply. As part of the impection, ACHD sanitarians, in cooperation with the Ohio Department of Health, review plans for, license, and inspect all campground and public pools and spas. This includes pools that charge admission (city, county or school operated) or are offered for public use at hotels, motels or apartment complexes. The ACHD samples and tests all public pools on an annual basis or when a complaint is received.
H	Tattoo and Body Piercing Safety	ACHD sanitarians license and inspect all tattoo and body piercing

establishments annually to prevent injury and the possible transmission of disease through tattoos and body piercings. Working with the ACHD nursing staff, inspections focus on the overall sanitation of the facilities to assure compliance with state requirements.	The ACHD is responsible for enforcing a smoke-free environment in public facilities such as restaurants, bars, businesses, hotels and motels. This also includes enforcing a smoke-free environment in places of employment. Enforcement is performed on a complaint basis. Smoke-free environments eliminate cancer-causing agents and toxic chemicals from tobacco smoke in the air.
	Smoke-Free Compliance
	2

List of Prioritized Essential Supporting Activities (ESAs)

Priorit 7	Provide a Secure Workspace Provide a Secure Workspace Operation Cent ornainta alternate works Center be usual bemporary work Health. ACHD's Median appropriate respecting assist properting assist public Health P made through the Web-based apparent of technology plat includes but is telephones, seef telephones, seef	The Ashland County Health Department (ACHD) and its Emergency Operation Center (BOC) is located at the Ashland County Service Center. In order to maintain daily operating functions and respond to incident, an alternate workspace will be established should the Ashland County Service Center be usualle or inaccessible. ACHD will identify and set up a tetraporary workspace by working with community partners and the Board of Health. ACHD maintains a succession plan to assure continuation of MEPs and appropriate response to incidents. Should additional staff be needed, ACHD's Medical Reserve Unit 1181 can be called upon, as well as requesting assistance from other health departments utilizing the NECO Public Health Preparedness Aid Agreement. A staffing request can also be made through the Ashland County Emergency Management Agency. Web-based applications are essential for ACHD to access on a daily basis and during an incident. Key communication tools and the supporting technology platforms must be maintained for situational awareness. This includes but is not limited to IT support for computers, mobile devices and telephones, software and databases, and the internet.
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		Staff Needed	Staff Availabl e	Primary Person(x) Assigned	Backup Personnel
Position Type I	Epidemiologis t	1.0	1.0	Jenna Gerwig	Hena Samdani (MRC volunteer)
	Public Health Nurse	1.6	1.6	Laurie McFarlin	Shirley Bixby
	TOTAL	2.6	2.6	2	2

MEP Prio	rity: 2 ME	Title Fo	od Protectio	0	
		Staff Needed	Staff Availabl	Primary Person(s) Assigned	Backup Personnel
	Registered Sanitarian	2.0	4.0	Jennifer Frazier Tom Cassell	Pat Donaldson AJ Sturgis
	TOTAL	2.0	4.0	2	2

		Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
Position Type I	Public Health Nurse	0.2	2.6	Shirley Bixby	Laurie McFarlin Jenna Gerwig
	TOTAL	0.2	2.6	1	2

MEI Prio	CHYSH MA	1111250		ivata Water Services	
		Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Buckup Personnel
	Registered Sanitarian	1.0	2.0	AJ Storgis	Pat Donaldson
P2.110.2.1	TOTAL	1.0	2.0	1	1

MEF Pro	nty 5 MH	F Trile: Statistical and Records Management					
		Staff Needed	Staff Availabl c	Primary Person(s) Assigned	Backup Personnel		
Position Type I	Clerical	1.4	3.0	Lauren Jeffery Andrea Ellison	Jenny Helbert		
	TOTAL	1.4	3.0	2	1		

MEF Priority 6 MEF Title: Children with Medical Hardicaps

1		Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
Position Type I	Public Health Nurse	1.5	2.5	Michele Funk Jenna Boliantz	Jenna Gerwig
	TOTAL	1.5	2.5	2	1

		Staff' Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
Position Type 1	Public Health Nurse	0.2	2.5	Shirley Bixby	Michele Funk Jenna Boliantz
	TOTAL	0.2	2.5	1	2

MEF Prio	rity: 8 ME	P Title: Ani	mal Bdg Pr	ogram	
		Staff Needed	Staff Available	Primary Person(s) Assigned	Backup Personnel
	Director of Environmenta I Health	0.2	1.0	Pat Donaldson	
	TOTAL	0.2	1.0	1	

MEP Poor	rity. 9 MF	F Title: So	lid Waste Se	prvices	20
		Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
	Registered Sanitarian	0.2	2.0	Pat Donaldson	AJ Sturgis
	TOTAL	0.2	2.0	1	1

	Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
Registered Sanitarians	1.4	2.0	AJ Sturgis	Pat Donaldson
TOTAL	1.4	2.0	1	1

MEF Priority 11. ME	F Title: Tel	see and Bed	y Piercing Safety	
	Staff		Primary Person(s) Assigned	Backup Personnel

			e		
Type 1	Public Health Nurse	0.1	1.0	Shirley Bixby	
	Registered Sanitarian	0.1	1.0	Pat Donaldson	
	TOTAL	0.2	2.0	2	

MEE Price	city: 12 MER	F Tille Sir	toke-Free C	ompliance	
		Staff' Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
	Registered Sanitarian	0.1	2.0	Tom Cassell	Jennifer Frazier
	TOTAL	0.1	2.0	1	1

		Staff Needed	75.353031.0734	Primary Person(s) Assigned	Backup Personnel
Position Type I	Administrato r	1.0	1.0	Sarah Goodwill Humphrey	
Position	10 0 0 000	1.0	1.0	Jill Hartson	
	TOTAL	2.0	2.0	2	

		Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel
Position Type I	Administrator	1.0	2.0	Sarah Goodwill Humphrey	Jill Hartson
Position Type 2	Director of Nursing	1.0	2.0	Shirley Bixby	Jenna Gerwig
Position Type 3	Director of Environmenta 1 Health	1.0	2.0	Pat Donaldson	Jenny Helbert
	TOTAL	3.0	6.0	3	3

ESA Priority 1 PSA Tulo: Assure Information Technology Support							
		Staff Needed	Staff Availabl e	Primary Person(s) Assigned	Backup Personnel		
Position Type I	Administrato r	0.5	1.0	Sarah Goodwill Humphrey			

Position Type 2	IT Specialist	1.0	2.0	Steve Mullet	Jim Storch
	TOTAL	1.5	3.0	2	1

		Staff Needed	Staff Available	Primary Person(s) Assigned	Backup Personnel
Position Type 1	Administrato r	0.5	1.0	Sarah Goodwill Humphrey	
	County Prosecutor	1.0	2.0	Michael Donatini	Chris Tunnell
	TOTAL	1.5	3.0	2	1

MEF Priorit	MEF Title	Staff Neede d	Staff Available	Recovery Time Objective
1	Public Health Surveillance and Mitigation	2.6	2.6	24 hours
2	Food Protection	2.6	4.0	24 hours
3	Tuberculosis Program	0.2	2.6	24 hours
4	Sewage and Private Water Services	1.0	2.0	24 hours
5	Statistical and Records Management	1.4	3.0	24 hours
6	Children with Medical Handicaps	1.5	2.5	48-72 hours
7	Childhood Lead Program	0.2	2.5	24 hours
8	Animal Bite Program	0.2	1.0	24 hours
9	Solid Waste Services	0.2	2.0	48-72 hours
10	Recreational Program Inspections	1.4	2.0	24 hours
11	Tattoo and Body Piercing Safety	0.2	2.0	24 hours
12	Smoke-Free Compliance	0.1	2.0	48-72 hours

ESA Priorit	ESA Title	Staff Neede d	Staff Available	Recovery Time Objective
1	Provide a Secure Workspace	2.0	2.0	4 hours
2	Maintain Staffing Levels	3.0	6.0	8 hours
3	Assure Information Technology Support	1.5	3.0	4 hours
4	Legal Support and Expertise	1.5	3.0	24 hours

Orders of Succession.

Position	Designated Successors
Health Commissioner	Director of Environmental Health Director of Nursing PHEP Coordinator Medical Director of the Health Department
Position Details	
Has your agency drafted and approved a standing order of succession for the Office of the Health Commissioner?	Yes x No □
According to your legal counsel, does the Board of Health need to approve this order of succession?	Yes x No □
What are the triggers for implementing orders of succession? Consider the following: • Impacts to the original office-holder • Duration of those impacts • Other facilitating factors; if any	If the Health Commissioner is unavailable and cannot be reached for an 8 hour period, the president of the Board of Health will be consulted about appointing a successor. The successor will perform the job duties until a new HC is named, or the HC can resume their job duties.
What is the process for implementing orders of succession, i.e., how do successors assume the Office of Health Commissioner?	Upon notification, the Board of Health determines the necessity of a meeting to appointment an HC successor. The appointed successor notifies agency staff and agency partners they have assumed the role of HC until further notice.
What triggers the end of this succession?	The Board of Health either names a new HC or announces the HC has returned and will resume all responsibilities.
How will you communicate to your staff and partners that a successor has assumed the Office of Health Commissioner?	Staff would be notified in person with updates provided through internal e-mail. Community partners would be notified through e-mail as well.
Are there any limitations on the authority of successors who assume the Office of Health Commissioner through the order of succession? If yes, what are the limitations?	Yes □ No x If yes, please describe below.
Position	Designated Successors Chain of Command
Director of Environmental Health	Registered Sanitarian Environmental Health Clerk

	3. TBD by the HC during a COOP event
	4. TBD by the HC during a COOP event
Position Details	the state of the s
Does your agency intend to prepare an order of succession for the Office of the Director of Environmental Health OR to rely on the established chain of command?	Chain of Command
Has your agency drafted and approved a standing order of succession/chain of command for the Office of the Director of Environmental Health?	□ Yes x No
Position	Designated Successors Chain of Command
Director of Nursing	Epidemiologist Public Health Nurse CMH Nurse TBD by the HC during a COOP event
Position Details	Secretary of the second
Does your agency intend to prepare an order of succession for the Office of the Director of Nursing <u>OR</u> to rely on the established chain of command?	☐ Order of Succession x Chain of Command
Has your agency drafted and approved a standing order of succession/chain of command for the Office of the Director of Nursing?	□ Yes x No

Position	Designated Successors Chain of Command
	1. Assistant Medical Director
Madical Princeton	2. Director of Nursing
Medical Director	3. Epidemiologist
	4. TBD by the HC during a COOP event
Position Details	Balance Marine State of the State of
Does your agency intend to prepare an order of succession for the Office of the Medical Director <u>OR</u> to rely on the established chain of command?	☐ Order of Succession x Chain of Command
Has your agency drafted and approved a standing order of succession/chain of command for the Office of the Medical Director?	□ Yes x No

Delegations	of Authority
List the positions/titles that have been delegated signature authority for the Health Commissioner.	Medical Director President of the Board of Health Director of Environmental Health PHEP Coordinator
Has your agency identified other authorities for which formal delegations have been prepared? If yes, please list these authorities. Add lines as needed.	Yes □ No x
According to your legal counsel, does the Board of Health need to approve any of these delegations of authority? If yes, which ones?	Yes □ No x
Have all the established delegations of authority been coordinated with your legal counsel to ensure legal sufficiency?	Yes □ No x
When do the identified authorities take effect? Check all that apply.	X ALL listed authorities are always in effect. The following authorities are always in effect: The following authorities are only in effect during a COOP event:

Can the identified authorities be re-delegated by delegates to other individuals?	☐ ALL listed authorities may be re-delegated by the delegates to other individuals. x NO listed authorities may be re-delegated by the delegates to other individuals. ☐ The following authorities may be re- delegated by the delegates to other individuals: •
In preparing your agency's delegations of authority, have you addressed the following: Incorporating the conditions under which delegations will take place; Method of notification; Duration the delegations may last; Conditions under which the delegations may be terminated; Any temporal, geographical, or organizational limitations to the authorities granted by the orders of succession or delegations of authorities, including the ability to redelegate authorities?	Check and provide details for all that apply. **The following delegations have addressed ALL of these considerations: **Signature authority The following delegations have addressed SOME of these considerations: ** The following delegations have addressed NONE of these considerations: **



ASHLAND COUNTY HEALTH DEPARTMENT

1763 State Route 60 - Ashland, Ohio 44805 419-282-4231 - 419-282-4360 Fax Sarah Goodwill Humphrey, MPH, CPH, RS Health Commissioner Equal Opportunity Employer / Provider

Public Records Policy

DEFINING AND ORGANIZING PUBLIC RECORDS Records that document the work of the Ashland County Health Department are public, unless they are exempt by law from disclosure. Public records laws apply to records in any format, including those that exist on paper, electronically (for example, email), or on any other media.

MAKING RECORDS ACCESSIBLE Public records are available for inspection during regular business hours. Records must be provided promptly for inspection, and copies must be made available within a reasonable period of time

PROCESSING REQUESTS It is the goal of the Ashland County Health Department that requests for public records be acknowledged in writing, or, if feasible, satisfied within three business days of the request. No "official" language is required to make a request for public records, and the request does not need to be in writing. The person making the request does not have to provide his or her identity, nor must he or she indicate how the records will be used. In fact, the office does not request such information. However, the person must identify the requested records with sufficient clarity to allow the office to retrieve them. If a request is ambiguous or overly broad, the office may deny the request but needs to contact the requester for clarification. The office should assist the person in revising the request by explaining how the office's records are organized and accessed.

HANDLING ELECTRONIC RECORDS Electronic records are to be treated in the same way as records in other formats. Email, text messages, and instant messages, for example, may be public records if their content documents the business of the office. Records transmitted to or from private email accounts to conduct public business are subject to disclosure, and all employees or representatives of the Ashland County Health Department are required to retain them in accordance with applicable records retention schedules.

DEALING WITH DENIALS OR REDACTIONS If the office withholds, redacts, or otherwise denies requested records, it must provide an explanation, including legal authority. If portions of a record are public and other portions are exempt, the exempt portions may be redacted while the rest are released. When making public records available for public inspection or copying, the office shall notify the requester of any redaction or make the redaction plainly visible.

Chalmingt	A Academi	Photos	
Originai	Adoption	LABC:	

DETERMINING COPYING AND MAILING CHARGES There is no charge to inspect public records. Copies of records are available at actual cost, excluding labor. The charge for paper copies is 5 cents per page. The actual cost of postage, mailing supplies, or other delivery costs may be charged. There is no charge for emailed documents. It is permissible to require payment of all costs in advance of delivery. The requester may choose whether to have the record copied on paper, on the same medium in which the public record is kept, or on any other medium upon which the Ashland County Health Department determines that the record can reasonably be duplicated as an integral part of the office's normal operations.